PHA 5-Year and	U.S. Department of Housing and Urban	OMB No. 2577-0226
	Development	Expires 4/30/2011
Annual Plan	Office of Public and Indian Housing	

1.0	PHA Information PHA Name Housing Au	thority of Par	is, KY	PHA Code: KY013					
		Performing	☐ Standard	☐ HCV (Section 8)					
	PHA Fiscal Year Beginning: (MM/YYYY):	04/2010							
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above)								
	Number of PH units: 203 Number of HCV units: 0								
3.0	Submission Type	П A 17	n	5. W . DI . O. I					
		Annual I	Pian Only	5-Year Plan Only					
4.0	PHA Consortia	HA Consortia	a: (Check box if submitting a joi	nt Plan and complete table be	low.)				
	Participating PHAs	PHA	Program(s) Included in the	Programs Not in the	No. of Un Program	Units in Each m			
		Code	Consorna	Consortia	PH	HCV			
	PHA 1:								
	PHA 2:								
	PHA 3:								
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.								
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: The mission of the Housing Authority of Paris is to promote adequate and affordable housing, economic opportunity and provide a suitable living environment free from discrimination.								

5.2 Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan.

The Housing Authority of Paris's (HAP's) goals and objectives over the next five years are:

1. Continue to implement effective maintenance policies to keep HAP's sites, building exteriors, building systems, common areas, and dwelling units in high quality condition. This will have a positive impact on HAP's residents as well as our community.

In the past HAP has implemented effective maintenance and management practices. Many of these were taken from best practices however there was nothing in writing in the form of a policy. This has worked very well as you can see HAP's PASS scores are among the top scores in Kentucky and well above the national average. However it is HAP's objective to take this one step further. HAP's goal is to development a Preventative Maintenance Policy, when adopted, will continue to keep HAP's PASS scores among the top in Kentucky as well as the Nation.

2. HAP will continue to work with our Special Needs population through reasonable accommodations where possible. During the January 2010 re-certification process, each resident was asked if they were in need of any type of special accommodation. Their responses were documented for HUD's review. HAP realizes that our needs change due to the aging process, medical needs, and accidents. This will be an ongoing process and HAP will document any request for a reasonable accommodation and will grant that request as long as it does not affect the integrity of the unit and place a financial burden on the Housing Authority.

In addition, potential applicants upon submission of applications are also asked if they are in need of any type of special accommodation. It is HAP's goal to meet the needs of our Special Needs Population within the Housing Authority and potential applicants when possible.

HAP will seek out organizations and law enforcement agencies in an effort to review HAP's policies and the possibility of offering a preference to women that have been victims of domestic violence, dating violence, sexual assault, or stalking.

Over the course of the next fiscal year, HAP will open discussions with local law enforcement agencies, safe houses, and counselors in an effort to better understand women that have become victims of domestic violence, dating violence, sexual assault, or stalking. This information along with data collected from our local area will be presented to the Board of Commissioners. HAP's current Admissions and Continued Occupancy Policy and Procedures (ACOPP) allows for preferences. It is HAP's goal that the Board of Commissioners will adopt a preference for women that have been victims of domestic violence.

4. HAP will continue to reduce the turnover time for vacated public housing units.

Because of the quality of service that is delivered to our residents, HAP's move-outs remained low during the fiscal year 2009. There were only twenty-three (23) move-outs which resulted in an average unit downtime of eight (8) days per unit, three (3) days of make ready time, and twelve days (12) days of lease-up time. The average unit turnaround days totaled twenty-two and one half (22.52) per unit. The staff at HAP is very proud of this accomplishment however HAP is always looking for ways to improve. With anticipation of the adoption of a Preventative Maintenance Policy unit turn around time should further be reduced because some items will have been addressed as part of the Preventative Maintenance Plan prior to the unit being vacated.

5. HAP will continue to participate in the Capital Fund Program (CFP) for the modernization of public housing units.

Each year HAP is offered an opportunity to participate in the Capital Fund Program for the modernization of public housing. HAP has and will continue to accept and participate in any offering of Capital Funds as well as apply for optional competitive grants made available to Public Housing Agencies. As you will see from the attached 5 Year and Annual Plan HAP has not only planned for fiscal year 2011 but has accessed HAP's needs through fiscal year 2014.

	PHA Plan Update
6.0	 (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. The Public may obtain a copy of the 5-Year and Annual Plan at The Housing Authority of Paris, KY located at #2 Horton Drive, Paris, KY 40362
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. Include statements related to these programs as applicable.
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing.
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.
8.3	Capital Fund Financing Program (CFFP). Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

9.1 Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.

Additional Information. Describe the following, as well as any additional information HUD has requested.

- (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.
- a. Overview of the past five year goals:

Over the past five years the mission of the Housing Authority of Paris (HAP) was and continues to be the promotion of adequate and affordable housing in a suitable living environment free from discrimination. HAP is very proud of its record:

- HAP has met the requirements for wheel chair accessibility and site and hearing impaired apartments.
- b. In addition HAP implemented effective maintenance and management practices that have placed HAP among the top PHA's in Kentucky and above the national average. The Physical Assessment Subsystem (PASS), grades the physical condition of housing authorities. Under PASS, independent contractors working for REAC inspect the quality of an authority's maintenance in five areas. During the 2009 PHAS Inspection HAP scored 25 out of a possible 30 points. There were only two (2) health and safety deficiencies which consisted of a broken light switch cover and a non-life threatening inoperable smoke detector.
- c. Because of the quality of service that is delivered to our residents, HAP's move-outs remained low during the fiscal year 2009. There were only twenty-three (23) move-outs which resulted in an average unit turnaround of twenty-two and one half (22.52) days per unit. The staff at HAP is very proud of this accomplishment.
- d. HAP has participated in all Capital Funds Programs offered.
- (b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

b. Definitions

Substantial Deviation is defined as "any change to the Mission Statement approved by the Board of Commissioners of the Housing Authority of Paris."

Significant Amendment or Modification to the Annual Plan:

- 1. Changes to rent, admissions policy or organization of the waiting list:
- 2. Additions of non-emergency work items, that do not change the mission statement, goals, or objectives (item not included in the current annual statement or five year action plan) or change in use of replacement reserve funds under the Capital Funds Program:
- 3. Any change with regard to demolition or disposition, designation, home ownership programs or conversion activities; and,
- 4. An exception to this definition will be made for any of the above that are adopted to reflect changes in HUD regulatory requirements. Such changes will not be considered significant amendments by HUD.

10.0

- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
 - (g) Challenged Elements
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

- **5.1 Mission**. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.
- 5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very lowincome, and extremely low-income families.
- PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:
 - (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
 - Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central off ice of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

Eligibility, Selection and Admissions Policies, including **Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for

- maintaining waiting lists for admission to public housing and address any site-based waiting lists.
- Financial Resources. A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.
- **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.
- Operation and Management. A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.
- **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.
- Designated Housing for Elderly and Disabled Families. With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: 1) development name and number; 2) designation type; 3) application status; 4) date the designation was approved, submitted, or planned for submission, and; 5) the number of units affected.
- Community Service and Self-Sufficiency. A description of: (1) Any programs relating to services and amenities provided or offered to assisted families; (2) Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; (3) How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. (Note: applies to only public housing).
- Safety and Crime Prevention. For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities

- conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.
- Pets. A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.
- 10. Civil Rights Certification. A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.
- 11. Fiscal Year Audit. The results of the most recent fiscal year audit for the PHA.
- 12. Asset Management. A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.
- 13. Violence Against Women Act (VAWA). A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.
- 7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers
 - (a) Hope VI or Mixed Finance Modernization or Development. 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm
 - (b) Demolition and/or Disposition. With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at:

http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm

Note: This statement must be submitted to the extent that

approved and/or pending demolition and/or disposition has changed.

- (c) Conversion of Public Housing. With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/conversion.cfm
 - http://www.ntd.gov/offices/phi/centers/sac/conversion.cm
- (d) Homeownership. A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.
- (e) Project-based Vouchers. If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.
- 8.0 Capital Improvements. This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.
 - 8.1 Capital Fund Program Annual Statement/Performance and Evaluation Report. PHAs must complete the Capital Fund Program Annual Statement/Performance and Evaluation Report (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:
 - (a) To submit the initial budget for a new grant or CFFP;
 - (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
 - (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

- At the end of the program year; until the program is completed or all funds are expended;
- When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- Upon completion or termination of the activities funded in a specific capital fund program year.
- 8.2 Capital Fund Program Five-Year Action Plan

- PHAs must submit the Capital Fund Program Five-Year Action Plan (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.
- 8.3 Capital Fund Financing Program (CFFP). Separate, written HUD approval is required if the PHA proposes to pledge any portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:
 - http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm
- **Housing Needs.** Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
 - 9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
- 10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:
 - Progress in Meeting Mission and Goals. PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).
 - Significant Amendment and Substantial Deviation/Modification. PHA must provide the definition

- of "significant amendment" and "substantial deviation/modification". (Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)
- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. (Note: Standard and Troubled PHAs complete annually).
- 11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations
 - Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - Resident Advisory Board (RAB) comments.
 - Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
 - Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.1.
 - Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only). See instructions in 8.2.

Par	t I: Summary					······································	
PHA Name/Number HA of Paris KY-013			Locality Paris, Bo	urbon County, KY	☑Original 5-Year Plan ☐Revision No:		
A.	Development Number and Name KY013-01 Grandview	Work Statement for Year I FFY 2010	Work Statement for Year 2 FFY 2011	Work Statement for Year 3 FFY 2012	Work Statement for Year 4 FFY 2013	Work Statement for Year 5 FFY 2014	
B.	Physical Improvements Subtotal	Atomore State overs	20,000	20,000	182,000	182,000	
C.	Management Improvements						
D.	PHA-Wide Non-dwelling Structures and Equipment		200,000				
E.	Administration		28,000	28,000	28,000	28,000	
F.	Other Fees & Costs		14,000	14,000	14,000	14,000	
G.	Operations		18,000	18,000	56,000	56,000	
H.	Demolition			200,000			
I.	Development						
J.	Capital Fund Financing – Debt Service						
K.	Total CFP Funds						
L.	Total Non-CFP Funds						
M.	Grand Total		280,000	280,000	280,000	280,000	

Work	porting Pages - Physical Needs Work Statement(s) Work Statement for Year 2011			Work Statement for Year; 2012			
Statement for	FFY 2011			FFY 2012			
Year 1 FFY 2010	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
///%%/////	KY013-01 Grandview			KY013-01 Grandview			
///							
/\$\$\$\$\$\$\$\$\$\$ <i>\</i>	Upgrade vacated units		20,000	Upgrade vacated units		20,000	
	Construct Office and			Demolition			
	Community Building		200,000	KY013-01, 02		200,000	
	Administration	A	28,000	Administration		28,000	
	Fees and Costs A/E		14,000	Fees and Costs A/E		14,000	
	Operations		18,000	Operations		18,000	
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	Sub	total of Estimated Cost	\$ 280,000	Subtot	tal of Estimated Cost	\$ 280,000	

Part II: Sup	porting Pages – Physic	cal Needs Work State	ment(s)				
Work	W	ork Statement for Year 20	13	Work Statement for Year: 2014 FFY 2014			
Statement for		FFY 2013					
Year 1 FFY	Development Number/Name General Description of	Quantity	Estimated Cost	Development Number/Name General Description of	Quantity	Estimated Cost	
	Major Work Categories			Major Work Categories KY013-01 Grandview			
/////XXX	KY013-01 Grandview			KY013-01 Grandview			
///8161610601//	Upgrade vacated units	A ALLEMAN PROPERTY AND	40,000	Upgrade vacated units		40,000	
	Replace HVAC Units		142,000	Replace HVAC Units		142,000	
	Administration		28,000	Administration		28,000	

	Fees and Costs A/E		14,000	Fees and Costs A/E	· · · · · · · · · · · · · · · · · · ·	14,000	
			46.000			7.000	
	Operations		56,000	Operations		56,000	

	W. C.	AULTH 1997					
	Sub	total of Estimated Cost	\$ 280,000	Subtotal of Estimated Cost \$ 280,000		\$ 280,000	

PHA Certifications of Compliance with PHA Plans and Related Regulations

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

PHA Certifications of Compliance with the PHA Plans and Related Regulations: Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the $\frac{X}{2}$ 5-Year and/or $\frac{X}{2}$ Annual PHA Plan for the PHA fiscal year beginning $\frac{4/2010}{2}$, hereinafter referred to as" the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

- 1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
- The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable
 Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing
 Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable
 Consolidated Plan.
- 3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
- 4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
- 5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
- 6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
- 7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
- 8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
- 9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
- 10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
- 11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

- 12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
- 13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
- 14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
- 15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
- 16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
- 17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
- 18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
- 19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
- 20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
- 21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
- 22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.

B. K. Blunner	11-10-10
Signature	Date
Richard L. Brunner	Board Chairperson
Name of Authorized Official	Title
I hereby certify that all the information stated herein, as well as any information provid prosecute false claims and statements. Conviction may result in criminal and/or civil per	
X Annual PHA Plan for Fiscal Years 2010 - 2010	_
X 5-Year PHA Plan for Fiscal Years 2011 - 2014	_
PHA Name	PHA Number/HA Code
Housing Authority of Paris	KY013

Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Civil Rights Certification

Annual Certification and Board Resolution

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner. I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

Housing Authority of Paris, KY			KY013		
PHA Name		PHA Number/HA Code			
	tated herein, as well as any information provonviction may result in criminal and/or civil				
Name of Authorized Official	Richard L. Brunner	Title		Board Chairperson	
Signature R. L. /	Brumer	Date	11-01-2010		

form **HUD-50077-CR** (1/2009) OMB Approval No. 2577-0226

Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name	
Housing Authority of Paris, Kentucky	
Program/Activity Receiving Federal Grant Funding	
PHA 5-Year and Annual Plan	
Acting on behalf of the above named Applicant as its Authorize the Department of Housing and Urban Development (HUD) regard	ed Official, I make the following certifications and agreements to ding the sites listed below:
I certify that the above named Applicant will or will continue to provide a drug-free workplace by: a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition. b. Establishing an on-going drug-free awareness program to inform employees (1) The dangers of drug abuse in the workplace: (2) The Applicant's policy of maintaining a drug-free workplace; (3) Any available drug counseling, rehabilitation, and employee assistance programs; and (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace. c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.; d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will	(1) Abide by the terms of the statement: and (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction: e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federalagency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant: f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended: or (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency: g. Making a good faith effort to continue to maintain a drug-
2. Sites for Work Performance. The Applicant shall list (on separate partial HUD funding of the program/activity shown above: Place of Perform Identify each sheet with the Applicant name and address and the program See attached Sheet	nance shall include the street address, city, county, State, and zip code.
Check here if there are workplaces on file that are not identified on the attact hereby certify that all the information stated herein, as well as any info warning: HUD will prosecute false claims and statements. Conviction may (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	ormation provided in the accompaniment herewith, is true and accurate.
Name of Authorized Official	Tille
Anna Vance Signature X Auna Value	Executive Director Date 10/25 / 20/0

form **HUD-50070** (3/98) ref. Handbooks 7417.1, 7475.13, 7485.1 & .3

Certification for a Drug-Free Workplace Sites for Work Performance Housing Authority of Paris, Kentucky PHA Annual Plan

KY013-01	Grandview Apartments	51 Units	Horton Drive	Paris, KY
KY013-02	Hill Side	22 Units	Hillside Drive	Paris, KY
KY013-03	New Acres (Site 1)	16 Units	Cypress Street	Paris, KY
KY013-04	Pleasant view	10 Units	8 th Street	Paris, KY
KY013-05	New Acres (Site 2)	14 Units	Pearl Street	Paris, KY
KY013-06	Marshall Heights	14 Units	Marshall Street	Paris, KY
KY013-07	Newtown Apartments	30 Units	High Street	Paris, KY
KY013-08	Pittenger Heights	30 Units	Vine Street	Paris, KY
KY013-09	Rains Manor	16 Units	Vine Street	Paris, KY

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Applicant Name	
Housing Authority of Paris, KY	
Program/Activity Receiving Federal Grant Funding PHA 5-Year and Annual Plan	
The undersigned certifies, to the best of his or her knowledge an	d belief, that:
(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connec-	(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.
tion with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.	This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required
(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.	certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.
I hereby certify that all the information stated herein, as well as any in	formation provided in the accompaniment herewith, is true and accurate.
Warning: HUD will prosecute false claims and statements. Conviction ma (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)	ay result in criminal and/or civil penalties.
Name of Authorized Official	Title
Anna Vance	Executive Director
Signature	Date (mm/dd/yyyy)
anna Cauce	10/25/2010

Previous edition is obsolete

form HUD 50071 (3/98) ref. Handboooks 7417.1, 7475.13. 7485.1, & 7485.3

DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB 0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352 (See reverse for public burden disclosure.)

	7000 1010100 101 PG	one bargerr arecrea	10.7	
1. Type of Federal Action:	2. Status of Federa	al Action:	3. Report Type:	
a. contract	b a. bid/o	offer/application	a a. initial fi	ling
b. grant		l award	b. material change	
c. cooperative agreement	c. post	-award	For Material	Change Only:
d. loan			year	quarter
e. loan guarantee			date of la	st report
f. loan insurance				
4. Name and Address of Reportin	g Entity:	5. If Reporting Er	itity in No. 4 is a S	ubawardee, Enter Name
▼ Prime Subawardee		and Address of	Prime:	
Housing Authority of Paris, KY	, if known:	N/A		
P. O. Box 468				
# 2 Horton Drive				
Paris, KY 40362				
Congressional District, if knowledge	7: 4c 6th	Congressional	District, if known:	
6. Federal Department/Agency:			m Name/Descript	on:
Department of Housing and Urban I	Development	Annual Contributions Contract # A-3757		
		CFDA Number,	if applicable:	
8. Federal Action Number, if know	n:	9. Award Amount	, if known:	
		\$		
10. a. Name and Address of Lobb	ying Registrant	b. Individuals Per	forming Services	(including address if
(if individual, last name, first i		different from N		,
N/A	,	(last name, first	t name, MI):	
		N/A		
		<u> </u>		
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.			una Ca	lle
		Print Name: Anna	Vance	
		Title: Executive Dir		
				10//
		Telephone No.: _(8	139) 98/-23/3	Date: 10/25/20/0
Federal Use Only:				Authorized for Local Reproduction
redetar use Only:				Standard Form LLL (Rev. 7-97)

Approved by OMB 0348-0046

DISCLOSURE OF LOBBYING ACTIVITIES CONTINUATION SHEET

orting Entity:	Housing Authority of Paris, H	(Y	Page1 of1	
N/A				
No Lobbin	g Activities performed.			

Authorized for Local Reproduction Standard Form - LLL-A

Part I: S	Summary	_				
	ne: Housing Authority of	FFY of Grant: 2010				
Paris, KY Grant Type and Number Capital Fund Program Grant No: KY36P0			/36P013501_10			FFY of Grant Approval:
1		Replacement Housing Factor Grant	No:			
		Date of CFFP:				
Type of G	rant					
Origin	nal Annual Statement	Reserve for Disasters/Emergencie	es	Revised Annual Stater)
	mance and Evaluation Report	t for Period Ending:		Final Performance an	d Evaluation Report	
Line	Summary by Development	Account		Total Estimated Cost		Total Actual Cost 1
	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	*	Original	Revised ²	Obligated	Expended
	Total non-CFP Funds					
2	1406 Operations (may not ex-	ceed 20% of line 21) ³	13,000			
3	1408 Management Improvem	nents				
4	1410 Administration (may no	et exceed 10% of line 21)	28,000			
5	1411 Audit					
6	1415 Liquidated Damages	***************************************				
7	1430 Fees and Costs		14,000			
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures		10,000			
11	1465.1 Dwelling Equipment-	-Nonexpendable				
12	1470 Non-dwelling Structures	3	200,000			
13	1475 Non-dwelling Equipmen	nt				
14	1485 Demolition		15,000			
15	1492 Moving to Work Demor	nstration				
16	1495.1 Relocation Costs					
17	1499 Development Activities	4				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part I: S	Part I: Summary								
PHA Nam Housing A of Paris, k	Authority Grant Type and Number Conitol Fund Program Grant No. KV26P012501-10		FFY of Grant Approval:						
Type of G									
	inal Annual Statement Reserve for Disasters/Emergence	cies	□R	evised Annual Statement (revision no:)				
	ormance and Evaluation Report for Period Ending:			inal Performance and Evaluation Report					
Line	Summary by Development Account		Total Estimated Cost		actual Cost 1				
		Original	Revised ¹	Obligated	Expended				
18a	1501 Collateralization or Debt Service paid by the PHA								
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment								
19	1502 Contingency (may not exceed 8% of line 20)								
20	Amount of Annual Grant:: (sum of lines 2 - 19)	280,000							
21	Amount of line 20 Related to LBP Activities								
22	Amount of line 20 Related to Section 504 Activities								
23	Amount of line 20 Related to Security - Soft Costs								
24	Amount of line 20 Related to Security - Hard Costs								
25	Amount of line 20 Related to Energy Conservation Measures				A second				
Signature of Executive Director Date Signature of Public Housing Director Date									

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Page	s					**************************************			
PHA Name: Housing Authority of Paris, KY Cap CFI		Capital F CFFP (Y	Grant Type and Number Capital Fund Program Grant No: KY36P013501-10 CFFP (Yes/ No); teplacement Housing Factor Grant No:			Federal	Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Quantity T Account No.	Total Estimated Cost		Total Actual Cost		Status of Work	
7 test vittes					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
HA-Wide-1	Operations		1406		13,000			· ·	
HA-Wide-2	Administration		1410		28,000				
HA-Wide-3	Fees & Costs		1430		14,000				
HA-Wide-4	Upgrade Vacated Units	***************************************	1460		10,000				
HA-Wide-5	Construct Office & Community Bu	uilding	1470		200,000				
HA-Wide-6	Demolition		1485		15,000				
	TOTAL CFP				280,000				
								 	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part III: Implementation Scho	edule for Capital Fund	Financing Program			
PHA Name: Housing Author	Federal FFY of Grant: 2010				
Development Number Name/PHA-Wide Activities	Obligated Ending Date)	All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
HA-Wide-1	08/31/2012		08/31/2014		
HA-Wide-2	08/31/2012		08/31/2014		
HA-Wide-3	08/31/2012		08/31/2014		
HA-Wide-4	08/31/2012		08/31/2014		
HA-Wide-5	08/31/2012		08/31/2014		
HA-Wide-6	08/31/2012		08/31/2014		

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Na	HA Name: Housing Authority of aris, KY Grant Type and Number Capital Fund Program Grant No: KY36P013501-06 Replacement Housing Factor Grant No: Date of CFFP:					
Type of ☐ Orig ☑ Perf	inal Annual Statement	Reserve for Disasters/Emergencort for Period Ending: 11/5/2010	ies	☐ Revised Annual Statem ☐ Final Performance	nent (revision no: and Evaluation Report	
Line	Summary by Developmen	t Account		Total Estimated Cost		Total Actual Cost 1
1	Total non-CFP Funds		Original	Revised ²	Obligated	Expended
2	1406 Operations (may not e	exceed 20% of line 21) 3	30,283	126,012	126,012	126,012
3	1408 Management Improve	ements				
4	1410 Administration (may r	not exceed 10% of line 21)	30,000	29,135	29,135	29,135
5	1411 Audit					
6	1415 Liquidated Damages	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
7	1430 Fees and Costs		20,000	27,976	27,976	27,976
8	1440 Site Acquisition					
9	1450 Site Improvement		0	4,271	4,271	4,271
10	1460 Dwelling Structures		50,000	67,425	67,425	67,425
11	1465.1 Dwelling Equipment	t—Nonexpendable				
12	1470 Non-dwelling Structur	res	160,000	0	0	0
13	1475 Non-dwelling Equipm	ent	0	35,464	35,464	35,464
14	1485 Demolition				<u> </u>	
15	1492 Moving to Work Dem	onstration				
16	1495.1 Relocation Costs	**************************************				
17	1499 Development Activitie	es ⁴				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part I: S					
PHA Nam Housing A of Paris, I	Authority Grant Type and Number Conital Fund Program Grant No. V.V26D012501.06			of Grant:2006 of Grant Approval:	
Type of G	rant				
Origi	inal Annual Statement Reserve for Disasters/Emerger	icies	Revised 2	Annual Statement (revision no:)
N Perfe	ormance and Evaluation Report for Period Ending: 11/5/2010		☐ Final	Performance and Evaluation I	Report
Line	Summary by Development Account	T	otal Estimated Cost	To	tal Actual Cost 1
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	290,283	290,283	290,283	290,283
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signatur	Signature of Executive Director Date 11-10-2010 Signature of Public Housing Director Date				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

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· ·	

Part II: Supporting Page									
PHA Name: Housing Au	A Name: Housing Authority of Paris, KY Grant Type and Number Capital Fund Program Grant No: KY36P013501-06 CFFP (Yes/ No): Replacement Housing Factor Grant No:								
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estin	nated Cost	Total Actual	Cost	Status of Work
					Original	Revised 1	Funds Obligated ²	Funds Expended ²	
HA-Wide-1	Operations		1406		30,283	126,012	126,012	126,012	Complete
HA-Wide-2	Administration		1410		30,000	29,135	29,135	29,135	Complete
HA-Wide-3	A/E Fees		1430		20,000	14,126	14,126	14,126	Complete
HA-Wide-4	Application Preparation		1430		0	1,250	1,250	1,250	Complete
HA-Wide-5	Energy Audit		1430		0	6,200	6,200	6,200	Complete
HA-Wide-6	Appraisal Fees		1430		0	300	300	300	Complete
HA-Wide-7	Asbestos Survey		1430		0	3,500	3,500	3,500	Complete
HA-Wide-8	Geotechnical Report		1430		0	2,600	2,600	2,600	Complete
HA-Wide-9	Playground Removal		1450		0	1,030	1,030	1,030	Complete
HA-Wide-10	Plumbing and Gasline Repair		1450		0	3,241	3,241	3,241	Complete
HA-Wide-11	Upgrade Vacant Units		1460		50,000	67,425	67,425	67,425	Complete
HA-Wide-12	Construct Comm Room & Office	Bldg.	1470		160,000	0	0	0	Complete
HA-Wide-13	Purchase Truck and Van		1475		0	22,625	22,625	22,625	Complete
HA-Wide-14	Purchase Computer System		1475		0	12,839	12,839	12,839	Complete
	TOTAL CFP				290,283	290,283	290,283	290,283	Complete

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

	Summary				400000 400000 4000000 40000000000000000	Expues 4750
PHA Na Paris, K	ame: Housing Authority of KY	FFY of Grant: 2007 FFY of Grant Approval:				
🗌 Orig	Grant ginal Annual Statement formance and Evaluation Repo	Reserve for Disasters/Emergeners for Period Ending: 11/5/2010	ties	Revised Annual States	nent (revision no: e and Evaluation Report)
Line	Summary by Developmen	t Account		Total Estimated Cost		Total Actual Cost 1
ī	Total non-CFP Funds		Original	Revised ²	Obligated	Expended
2	1406 Operations (may not e	exceed 20% of line 21) ³	19,380	0	0	0
3	1408 Management Improve	ments				
4	1410 Administration (may r	not exceed 10% of line 21)	30,000	25,898	25,898	25,898
5	1411 Audit					
5	1415 Liquidated Damages					
7	1430 Fees and Costs		20,000	5,950	5,950	5,950
3	1440 Site Acquisition					
9	1450 Site Improvement		44,000	0	0	0
10	1460 Dwelling Structures		50,000	227,532	227,532	188,149
11	1465.1 Dwelling Equipment	Nonexpendable				
12	1470 Non-dwelling Structur	es				
13	1475 Non-dwelling Equipme	ent				
4	1485 Demolition		96,000	0	0	0
5	1492 Moving to Work Demo	onstration	<u> </u>			
16	1495.1 Relocation Costs	**************************************				
17	1499 Development Activitie	s ⁴				
			1	l l	1	1

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part I: S	ummart/				
PHA Nam Housing A of Paris, K	e: uthority Grant Type and Number			FFY of Grant:2007 FFY of Grant Approval:	
Type of G	rant		····		
Origi	nal Annual Statement Reserve for Disasters/Emergence	ies		Revised Annual Statement (revision no:)
Perfo	rmance and Evaluation Report for Period Ending: 11/5/2010			Final Performance and Evaluation Re	port
Line	Summary by Development Account		Total Estimated Cost		Actual Cost 1
		Origina	Revised	2 Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	259,380	259,380	259,380	219,997
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs	***************************************			***************************************
24	Amount of line 20 Related to Security - Hard Costs	A77,4			
25	Amount of line 20 Related to Energy Conservation Measures				
Signatur	e of Executive Director Date	2010	Signature of Public Ho	ousing Director	Date

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Page	s								
PHA Name: Housing Au	Capital Fu CFFP (Ye	Fype and Number Fund Program Grant No: KY36P013501-07 Yes/ No): ement Housing Factor Grant No:			Federal	Federal FFY of Grant: 2007			
Development Number Name/PHA-Wide	General Description of Major W Categories	Vork	Development Account No.		Total Estimated Cost		Total Actual Cost		Status of Work
Activities					Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide-1	Operations		1406		19,380	0	0	0	
HA-Wide-2	Administration/Modernization Consultant		1410		30,000	25,898	25,898	25,898	Complete
HA-Wide-3	A/E		1430		20,000	5,950	5,950	5,950	Complete
HA-Wide-4	Landscaping		1450		10,000	0	0	0	
HA-Wide-5	Signage		1450		9,000	0	0	0	
KY013-8-6	Curb Ramps, Fencing, Handrails		1450		25,000	0	0	0	
KY013-7-7	Replace Exterior Steps		1460		30,000	87,974	87,974	48,591	
HA-Wide-8	Upgrade Units		1460		20,000	0	0	0	
KY013-7-9	Replace Screen Doors		1460		0	17,674	17,674	17,674	Complete
HA-Wide-10	Replace Roofs and Trim	ANNAMENT	1460		0	121,884	121,884	121,884	Complete
KY013-1&2-11	Demolition		1485		96,000	0	0	0	
	TOTAL CFP	- Colorador - Colo			259,380	259,380	259,380	219,997	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Expires 4/30/2011

Summary									
ame: Housing Authority of Y	Capital Fund Program Grant No: KY36P013501-08 Replacement Housing Factor Grant No: Date of CFFP:								
Grant ginal Annual Statement formance and Evaluation Repo	rt for Period Ending: 11/5/2010	ies)				
Summary by Development		Total Actual Cost t							
Total non CED Funda		Original	Revised ²	Obligated	Expended				
	exceed 20% of line 21) ³	73,764	1,576	1,576	0				
1408 Management Improve	ments								
1410 Administration (may n	not exceed 10% of line 21)	30,000	22,000	22,000	14,472				
1411 Audit									
1415 Liquidated Damages									
1430 Fees and Costs		20,000	4,400	4,400	0				
1440 Site Acquisition									
1450 Site Improvement		50,000	183,000	183,000	107,482				
1460 Dwelling Structures		50,000	62,788	62,788	62,788				
1465.1 Dwelling Equipment	Nonexpendable	5,000	0	0	0				
1470 Non-dwelling Structure	es								
1475 Non-dwelling Equipme	ent								
1485 Demolition		45,000	0	0	0				
	onstration								
1495.1 Relocation Costs									
1499 Development Activitie	s ⁴								
	Grant inal Annual Statement ormance and Evaluation Repo Summary by Development Total non-CFP Funds 1406 Operations (may not e 1408 Management Improved 1410 Administration (may r 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1440 Site Acquisition 1450 Site Improvement 1460 Dwelling Structures 1465.1 Dwelling Equipment 1470 Non-dwelling Equipment 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demo	Grant Type and Number Capital Fund Program Grant No: K Replacement Housing Factor Grant Date of CFFP: Grant inal Annual Statement Date of CFFP: Grant Grant Inal Annual Statement Date of CFFP: Grant Type and Number Capital Fund Program Grant No: K Replacement Housing Factor Grant Date of CFFP: Grant Type and Number Capital Fund Program Grant No: K Replacement Housing Factor Grant Date of CFFP: Grant Type and Number Capital Fund Program Grant No: K Replacement Housing Factor Grant Date of CFFP: Grant Type and Number Capital Fund Program Grant No: K Replacement Housing Factor Grant Date of CFFP: Grant Type and Number Capital Fund Program Grant No: K Replacement Housing Factor Grant Date of CFFP: Grant Type and Number Capital Fund Program Grant No: K Replacement Housing Factor Grant Date of CFFP: Grant Type and Number Capital Fund Program Grant No: K Replacement Housing Factor Grant Date of CFFP: Grant Type and Number Capital Fund Frogram Grant No: K Replacement Housing Factor Grant Date of CFFP: Grant Type and Number Capital Fund Frogram Grant No: K Replacement Housing Earlier Date of CFFP: Grant Type and Number Capital Fund Food of Ince Date of CFFP: Grant Type and Number Capital Fund Food of Ince Date of CFFP: Grant Type and Number Capital Fund Food of Ince Date of CFFP: Grant Type and Number Capital Fund Food of Ince Date of CFFP: Grant Type and Number Capital Factor Grant Type and Number Capital Factor Factor Factor Grant Type and Cost India Statement Date of CFF Prode Total Annual Statement Date of CFF Prode Total Non-CFP Type and Number Companies Total Annual Statement Date of CFP Type and Cost Total Non-CFP Type and Number Type and Cost Total Non-CFP Type and Cost Total Non	Grant Type and Number Capital Fund Program Grant No: KY36P013501-08 Replacement Housing Factor Grant No: Date of CFFP: Grant Inal Annual Statement Reserve for Disasters/Emergencies ormance and Evaluation Report for Period Ending: 11/5/2010 Summary by Development Account Total non-CFP Funds 1406 Operations (may not exceed 20% of line 21) 3 73,764 1408 Management Improvements 1410 Administration (may not exceed 10% of line 21) 30,000 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 20,000 1440 Site Acquisition 1450 Site Improvement 50,000 1460 Dwelling Structures 1470 Non-dwelling Structures 1475 Non-dwelling Structures 1475 Non-dwelling Structures 1475 Non-dwelling Equipment 1485 Demolition 45,000 1492 Moving to Work Demonstration 1495.1 Relocation Costs	Grant Type and Number Capital Fund Program Grant No: KY36P013501-08 Replacement Housing Factor Grant No: Date of CFFP: Date of CFFP Date of CFFP	Grant Type and Number Capital Fund Program Grant No: KY36P013501-08 Replacement Housing Factor Grant No: Date of CFFP: Revised Annual Statement (revision no: Date of CFFP: Final Performance and Evaluation Report for Period Ending: 11/5/2010 Total Estimated Cost Total Operations (may not exceed 20% of line 21) Total Operations (may not exceed 20% of line 21) Total Operations (may not exceed 10%				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part I: S	ummary				
PHA Nam Housing A of Paris, B	uthority Grant Type and Number Conital Fund Program Grant No. KV26P012501 08			FFY of Grant:2008 FFY of Grant Approval:	
Type of G	rant				
Origi	nal Annual Statement Reserve for Disasters/Emergence	eies		tevised Annual Statement (revision no:)
Perfo	rmance and Evaluation Report for Period Ending: 11/5/2010			Tinal Performance and Evaluation Rep	ort
Line	Summary by Development Account		Total Estimated Cost		Actual Cost 1
		Origina	l Revised	² Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	273,764	273,764	273,764	184,742
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signatur	of Executive Director Date	2010	Signature of Public Ho	ousing Director	Date

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Page	s							
PHA Name: Housing Au	Type and Number Fund Program Grant No: KY36P013501-08 [Yes/ No): ement Housing Factor Grant No:			Federal	Federal FFY of Grant: 2008			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Account No.	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
HA-Wide-1	Operations	1406		73,764	1,576	1,576	0	
HA-Wide-2	Administration/Modernization Consultar	nt 1410		30,000	22,000	22,000	14,472	
HA-Wide-3	A/E	1430		20,000	4,400	4,400	0	
HA-Wide-4	Landscaping, Parking	1450		50,000	33,000	33,000	0	
KY013-7,8-5	Replace Walks, Steps, Handrails	1450		0	150,000	150,000	107,482	
HA-Wide-6	Upgrade Vacated Units	1460		50,000	0	0	0	
HA-Wide-7	Replace Roofs and Trim	1460		0	62,788	62,788	62,788	Complete
HA-Wide-8	Purchase Appliances	1465		5,000	0	0	0	
KY013-1,2-9	Demolition	1485		45,000	0	0	0	
	TOTAL CFP			273,764	273,764	273,764	184,742	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part I: S	ummary		444444		333333333333333333333333333333333333333	**************************************
PHA Nam Paris, KY	e: Housing Authority of	Grant Type and Number Capital Fund Program Grant No: KY36P0 Replacement Housing Factor Grant No: Date of CFFP:	13501-09			FFY of Grant: 2009 FFY of Grant Approval:
⊠ Perfor	al Annual Statement [mance and Evaluation Report	Reserve for Disasters/Emergencies for Period Ending: 11/5/2010			e and Evaluation Report	
Line	Summary by Development A	Account		Total Estimated Cost		Total Actual Cost 1
1	Total non CED Post	***************************************	Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds					
2	1406 Operations (may not exc	·	61,014		0	0
3	1408 Management Improvement					
4	1410 Administration (may no	t exceed 10% of line 21)	27,334		0	0
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs		15,000		0	0
8	1440 Site Acquisition					
9	1450 Site Improvement	120000000000000000000000000000000000000	30,000		0	0
10	1460 Dwelling Structures	13333000	50,000		0	0
11	1465.1 Dwelling Equipment—	-Nonexpendable			0	0
12	1470 Non-dwelling Structures					14171
13	1475 Non-dwelling Equipmer	nt				
14	1485 Demolition		90,000		0	0
15	1492 Moving to Work Demor	nstration	13033000	***************************************	***************************************	
16	1495.1 Relocation Costs					
17	1499 Development Activities	4				

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

Expires 4/30/2011

Dort I. C.	xxmmort/				
Part I: Si PHA Name Housing A of Paris, K	Grant Type and Number Authority Control Fund Program Grant No. KV36P013501.00			FFY of Grant:2009 FFY of Grant Approval:	
Type of G	rant inal Annual Statement Reserve for Disasters/Emergenc	iac		Revised Annual Statement (revision no:)
	ormance and Evaluation Report for Period Ending: 11/5/2010	ics		Final Performance and Evaluation Rep	ort
Line	Summary by Development Account		Total Estimated Cost	Total	Actual Cost 1
		Origin	nal Revised	² Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				***************************************
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2 - 19)	273,348		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				
Signatur	re of Executive Director Date	- 2010	Signature of Public H	ousing Director	Date

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

	Grant T	vne and Number			1				
	Grant Type and Number Capital Fund Program Grant No: KY36P013501-09 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal	Federal FFY of Grant: 2009			
General Description of Major V Categories	Vork	Development Account No.	Quantity	Total Estim	ated Cost	Total Actual	Cost	Status of Work	
				Original	Revised	Funds Obligated ²	Funds Expended ²		
Operations		1406		61,014		0	0		
Administration		1410		27,334		0	0		
A/E		1430		15,000		0	0		
Landscaping, Fencing		1450		30,000		0	0		
Upgrade Vacated Units		1460		50,000		0	0		
Demolition		1485		90,000		0	0		
	J								

TOTAL CFP				273,348		0	0		
1	General Description of Major V Categories Operations Administration A/E Landscaping, Fencing Upgrade Vacated Units Demolition	General Description of Major Work Categories Operations Administration A/E Landscaping, Fencing Upgrade Vacated Units Demolition	General Description of Major Work Categories Development Account No. Operations Administration A/E Landscaping, Fencing Upgrade Vacated Units Demolition Demolition Demolition Demolition Demolition Description of Major Work Account No. Development Account No. 1406 1410 1410 1450 1450 1460 1485	General Description of Major Work Categories Development Account No. Operations Administration A/E Landscaping, Fencing Upgrade Vacated Units Demolition Demolition Quantity Quantity Account No. Power of the property	General Description of Major Work Categories Development Account No. Original	Categories Development Account No. Categories Categories Development Account No. Coriginal Revised	Categories	Categories Development Account No. Categories Categories Development Account No. Categories Categories Coriginal Revised Funds Expended Expended Coriginal Coriginal Revised Funds Coriginal Corig	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Expires 4/30/2011

Part I: Summary PHA Name: Housing Authority of FFY of Grant: 2009 Grant Type and Number Paris, KY FFY of Grant Approval: Capital Fund Program Grant No: KY36S013501-09 Replacement Housing Factor Grant No: Date of CFFP: Type of Grant Original Annual Statement ☐ Reserve for Disasters/Emergencies Revised Annual Statement (revision no: Performance and Evaluation Report for Period Ending: 11/5/2010 Final Performance and Evaluation Report Summary by Development Account **Total Estimated Cost** Total Actual Cost 1 Original Revised² Obligated Expended Total non-CFP Funds 1406 Operations (may not exceed 20% of line 21)³ 2 1408 Management Improvements 1410 Administration (may not exceed 10% of line 21) 31,750 17,880 17,880 13,661 5 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 18.850 18,900 18,900 18,588 1440 Site Acquisition 1450 Site Improvement 10 1460 Dwelling Structures 194,000 194,000 177,125 290,000 1465.1 Dwelling Equipment—Nonexpendable 11 52,376 36,220 76.500 76.500 12 1470 Non-dwelling Structures 13 1475 Non-dwelling Equipment 14 1485 Demolition 69,540 69,540 69,540 0 15 1492 Moving to Work Demonstration 16 1495.1 Relocation Costs 17 1499 Development Activities 4

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

Part I: S	ummary		**************************************							
PHA Nam Housing A of Paris, K	uthority Grant Type and Number Capital Fund Program Grant No. KV36S012S01.00			FFY of Grant:2009 FFY of Grant Approval:						
Type of G	rant									
Origi	nal Annual Statement Reserve for Disasters/Emergence	cies								
Performance and Evaluation Report for Period Ending: 11/5/2010										
Line	Summary by Development Account		Total Estimated Cost	Total Actual Cost 1						
		Original	Revised	Obligated	Expended					
18a	1501 Collateralization or Debt Service paid by the PHA									
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment									
19	1502 Contingency (may not exceed 8% of line 20)									
20	Amount of Annual Grant:: (sum of lines 2 - 19)	376,820	376,820	376,820	331,290					
21	Amount of line 20 Related to LBP Activities									
22	Amount of line 20 Related to Section 504 Activities									
23	Amount of line 20 Related to Security - Soft Costs									
24	Amount of line 20 Related to Security - Hard Costs									
25	Amount of line 20 Related to Energy Conservation Measures									
Signature of Executive Director Date Comparison										

 ¹ To be completed for the Performance and Evaluation Report.
 ² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
 ³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Page		. Pan B 18.1 B				******* * * * * * * * *	000	10,_00,_00
PHA Name: Housing Au	tal Fund Program Grant No: KY36S013501-09 P (Yes/ No): accement Housing Factor Grant No:							
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
TRUTTUOS				Original	Revised 1	Funds Obligated ²	Funds Expended ²	
HA-Wide-1	Administration/Modernization Consulta	int 1410		31,750	17,880	17,880	13,661	
HA-Wide-2	A/E Fees	1430		18,850	18,900	18,900	18,588	
HA-Wide-3	Replace Roofing, Gutters and Trim	1460		275,000	160,500	160,500	139,081	
HA-Wide-4	Install Insulation	1460		15,000	0	0	0	
HA-Wide-5	Purchase Screen Doors	1460		0	33,500	33,500	38,044	
HA-Wide-6	Purchase Appliances	1465		36,220	76,500	76,500	52,376	
KY013-1,2-7	Demolition	1485		0	69,540	69,540	69,540	Complete
	TOTAL CFP			376,820	376,820	376,820	331,290	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

HOUSING AUTHORITY OF PARIS, KY.

ANNA P. VANCE, PHM-EXECUTIVE DIRECTOR

859-987-2462 TDD-1-800-247-2510 avance@parishousingauthority.org. P.O. BOX 468 #2 HORTON DRIVE -PARIS, KY. 40362 859-987-2575

MINUTES OF THE RESIDENT BOARD MEETING November 22, 2010

The Housing Authority of Paris held a meeting of the Resident Board at the office of the PHA at #2 Horton Drive, Paris, Ky. on November 22, 2010.

The meeting was held by the Authority to discuss the Five Year Plan with the Resident Board and to give the Board the opportunity to offer suggestions which would assist in the preparation of the plan.

Those present:

Anna Preston Vance

Executive Director

Bob Stich

Maintenance Director

Barbara Wells

PHA Housing Manager
PHA Maintenance Clerk

Donna Howard Tim Duff

Resident

Nellie Rankin

Resident

Mrs. Vance gave a brief overview of the proposed plan which included a number of capitol improvements that will be needed during the next five years.

There were no comments received from the residents.

No other business was discussed and the meeting was adjourned.